U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - 10189	2. Fiscal Year Covered From:		
	1 / 1 / 2004 Through: 12 / 31 / 2004		
3. Name and address of person filing.	4. Name, file number, and address of labor organization.		
Name Hilliard P Sneed	Name Sheet Metal Workers Local Union #124		
	Labor Organization File Number 012-657		
P.O. Box, Bldg., Room No., if any $_{ m N/A}$	P.O. Box, Building and Room Number, if any $\mathrm{N/A}$		
Street 430 N. Air Depot Boulevard	Street 1404 N. W. 1st		
City Edmond	City Oklahoma City		
State Oklahoma ZIP Ccde + 4 73034	State Oklahoma ZIP Code + 4 73106		
5. Position in labor organization. Business Manager, FS/T			

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose emp oyees your organization represents or is actively seeking to represent.			
6. Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.		
Name Not Applicable			
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any			
	7.b. Amount.		
Street			
City			
State ZIP Ccde + 4	ı		

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information
submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the
undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)

Signed	H	ille	and	2	Ρ.	Sne	2
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On 08/13/2005

405-232-1453

Date

Telephone Number

File Number U-

Part B Continuation Page

8. Name and address of Business (including trade name, if any).	9. Business deals with:
Name Int'l. Training Institute for Sheet Metal	a. Labor Organization
Trade Name, if any: ITI	× b. Trust
P.O. Box, Bldg., Room No., if any	
Street 601 N. Fairfax St., Suite 240	c. Employer
City Alexandria	
State Virginia ZIP Code ÷ 4 22314	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.
Name Int'l. Training Institute for Sheet Metal	Not Applicable
Trade Name, if any: ITI	
P.O. Box, Bldg., Room No., if any	
Street 601 N. Fairfax St., Suite 240	
City Alexandria	
State Virginia ZIP Code + 4 22314	11.b. Approximate dollar value of such dealing.
	12.a. Nature of interest held or income received.
	NJATC Lodging & Airfare - Contest
	12.b. Amount. \$1,077

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B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested. 8. Name and address of Business (including trade name, if any). 9. Business deals with: Name Int'l. Training Institute for Sheet Metal a. Labor Organization Trade Name, if any: ITI X b. Trust P.O. Box, Bldg., Room No., if any c. Employer Street 601 N. Fairfax St., Suite 24) Alexandria City ZIP Code + 4 22314 State Virginia 11.a. Nature of such dealing. 10. If 9.b. or 9.c. is checked give trust or employer's name. Not Applicable Name Int'l. Training Institute for Sheet Metal Trade Name, if any: ITI P.O. Box, Bldg., Room No., if any Street 601 N. Fairfax St., Suite 240 11.b. Approximate dollar value of such dealing. City Alexandria 12.a. Nature of interest he'd or income received. NJATC Per Diem - Contest State Virginia ZIP Code + 4 22314 12.b. Amount. \$375

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).		14.a. Nature of payment.	
		Not Applicable	
Name Not Applicable			
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any			
Street			
City			
State	ZIP Code + 4		
13.b. Is the Business an Employer	or Ocnsultant ?	14.b. Amount of payment.	

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Part B Continuation Page

8. Name and address of Business (including trade name, if any).	9. Business deals with:
Name Int'l. Training Industry for Sheet Metal	a. Labor Organization
Trade Name, if any: ITI	
P.O. Box, Bidg., Room No., if any	X b. Trust
Street 601 N. Fairfax St., Suite 240	c. Employer
City Alexandria	
State Virginia ZIP Code + 4 22314	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.
Name Int'l. Training Institute for Sheet Metal	Not Applicable
Trade Name, if any: ITI	
P.O. Box, Bldg., Room No., if any	
Street 601 N. Fairfax St., Suite 240	
City Alexandria	
State Virginia ZIP Code + 4 22314	11.b. Approximate dollar value of such dealing.
	12.a. Nature of interest held or income received.
	NJATC Per Diem - Contest
	12.b. Amount. \$300

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Part B Continuation Page

8. Name and address of Business (including trade name, if any).	9. Business deals with:
Name Int'l. Training Institute for Sheet Metal	a. Labor Organization
Trade Name, if any: ITI	× b. Trust
P.O. Box, Bldg., Room No., if any	c. Employer
Street 601 N. Fairfax St., Suite 240	C. Employer
City Alexandria	
State Virginia ZIP Code + 4 22314	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.
Name Int'l. Training Institute for Sheet Metal	Not Applicable
Trade Name, if any: ITI	
P.O. Box, Bldg., Room No., if any	
Street 601 N. Fairfax St., Suite 240	
City Alexandria	
State Virginia ZIP Code + 4 22314	11.b. Approximate dollar value of such dealing.
	12.a. Nature of interest held or income received.
	NJATC Lodging - Contest
	12.b. Amount. \$466

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	12.b. Amount. \$284
	NUATO ATTLATE & .tavet - CONCEST
	12.a. Nature of interest held or income received. NJATC Airfare & Travel - Contest
State Virginia ZIP Code + 4 22314	11.b. Approximate dollar value of such dealing.
City Alexandria	
Street 601 N. Fairfax St., Suite 240	
Trade Name, if any: ITI P.O. Box, Bldg., Room No., if any	
Name Int'l. Training Institute for Sheet Metal	Not Applicable
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing. Not Applicable
State Virginia ZIP Code + 4 22314	
Street 601 N. Fairfax St., Suite 240	c. Employer
P.O. Box, Bldg., Room No., if any	X b. Trust
Trade Name, if any: ITI	a. Labor Organization
Name Int'l. Training Institute for Sheet Metal	
8. Name and address of Business (including trade name, if any).	9. Business deals with:

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8. Name and address of Business (including trade name, if any).	9. Business deals with:
Name Int'l. Training Institute for Sheet Metal Trade Name, if any: ITI P.O. Box, Bldg., Room No., if any Street 601 N. Fairfax St., Suite 240 City Alexandria	a. Labor Organization b. Trust c. Employer
State Virginia ZIP Code + 4 22314	
10. If 9.b. or 9.c. is checked give trust or employer's name. Name Int'l. Training Institute for Sheet Metal Trade Name, if any: ITI P.O. Box, Bldg., Room No., if any Street 601 N. Fairfax St., Suite 240 City Alexandria	11.a. Nature of such dealing. Not Applicable
State Virginia ZIP Code + 4 22314	11.b. Approximate dollar value of such dealing. 12.a. Nature of interest held or income received. NJATC Per Diem & Consulting - Contest
	12.b. Amount. \$825

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8. Name and address of Business (including trade name, if any).	9. Business deals with:
Name Int'l. Training Institute for Sheet Metal	a. Labor Organization
Trade Name, if any: ITI	× b. Trust
P.O. Box, Bldg., Room No., if any	
Street 601 N. Fairfax St., Suite 240	c. Employer
City Alexandria	
State Virginia ZIP Code + 4 22314	44 a Notice of such dealing
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing. Not Applicable
Name Int'l. Training Institute for Sheet Metal	NOT Applicable
Trade Name, if any: ITI	
P.O. Box, Bldg., Room No., if any	
Street 601 N. Fairfax St., Suite 240	
City Alexandria	
State Virginia ZIP Code + 4 22314	11.b. Approximate dollar value of such dealing.
	12.a. Nature of interest held or income received.
	NJATC Airfare, Lodging & Travel - Contest
	12.b. Amount. \$592

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8. Name and address of Business (including trade name, if any).	9. Business deals with:
Name National Energy Management Institute, Inc.	a. Labor Organization
Trade Name, if any: NEMI	b. Trust
P.O. Box, Bldg., Room No., if any	
Street 601 N. Fairfax St., Suite 250	C. Employer
City Alexandria	
State Virginia ZIP Code + 4 22314	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.
Name National Energy Management Institute, Inc.	Not Applicable
Trade Name, if any: NEMI	
P.O. Box, Bldg., Room No., if any	
Street 601 N. Fairfax St., Suite 250	
City Alexandria	
State Virginia ZIP Code + 4 22314	11.b. Approximate dollar value of such dealing.
	12.a. Nature of interest held or income received.
	Dinner - Landry's Seafood (TABB Meeting)
	12.b. Amount. \$27

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8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name Sheet Metal Workers JAC of Western Oklahoma	a. Labor Organization	
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any	× b. Trust	
Street 3909 Willow Springs	c. Employer	
City Oklahoma City		
State Oklahoma ZIP Code + 4 73112		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name Sheet Metal Workers JAC of Western Oklahoma	Not Applicable	
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any		
Street 3909 Willow Springs		
City Oklahoma City		
State Oklahoma ZIP Code + 4 73112	11.b. Approximate dollar value of such dealing.	
	12.a. Nature of interest held or income received.	
	Reimbursed expenses - host Regional Contest	
	12.b. Amount. \$855	
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Part B Continuation Page

8. Name and address of Business (including trade name, if any).	9. Business deals with:
Name and address of Business (including trade name, if any). Name Sheet Metal Workers JAC of Western Oklahoma Trade Name, if any: P.O. Box, Bidg., Room No., if any Street 3909 Willow Springs City Oklahoma City State Oklahoma ZIP Code + 4 73112 10. If 9.b. or 9.c. is checked give trust or employer's name. Name Sheet Metal Workers JAC of Western Oklahoma Trade Name, if any:	a. Labor Organization b. Trust c. Employer 11.a. Nature of such dealing. Not Applicable
P.O. Box, Bldg., Room No., if any Street 3909 Willow Springs City Oklahoma City State Oklahoma ZIP Code + 4 73112	11.b. Approximate dollar value of such dealing. 12.a. Nature of interest held or income received. Reimbursed expenses - host Regional Contest 12.b. Amount.
	12.b. Amount. \$25

Name	of Person	Filing	1143345	rd Sneed
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Part B Continuation Page

8. Name and address of Business (including trade name, if any).	9. Business deals with:		
Name Sheet Metal Workers JAC of Western Oklahoma	a. Labor Organization		
Trade Name, if any:	a. Labor Orga il Lation		
P.O. Box, Bldg., Room No., if any	, X b. Trust		
Street 3909 Willow Springs	c. Employer		
City Oklahoma City			
State Oklahoma ZIP Code + 4 73112			
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.		
Name Sheet Metal Workers JAC of Western Oklahoma	Not Applicable		
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any			
Street 3909 Willow Springs			
City Oklahoma City			
State Oklahoma ZIP Code + 4 73112	11.b. Approximate dollar value of such dealing.		
	12.a. Nature of interest held or income received.		
	Reimburse expenses for Training Center		
	12.b. Amount. \$61		